



Town of Rockport

34 Broadway, Mass. 01966

Rockport Historical District Commission Application

The undersigned applies to the commission for *(Please check one, if unsure leave blank)*

Email is our method of communications, if you do not have an email address please provide a phone number.

☐ Certificate of Appropriateness ☐ Certificate of Non-applicability ☐ Certificate of Hardship

Date: _____

1. **Address of Property:** _____

2. **Name of Property Owner:** _____

Mailing Address: _____

Email (Required): _____ Telephone: _____

3. **Name of Applicant:** *(if not owner)* _____

Mailing Address: _____

Email (Required): _____ Telephone: _____

4. **Required with Application** *(application is not considered complete unless the following is provided.)*

All Applications: Photographs and Product /Material list (samples, specs, brochures and photographs, may be printed from vendor web site)

Small Renovations: Sketches or drawing of proposed changes.

Major renovations or New Construction: Site and building plans, sectional drawing, 3D renderings any historical data available for the structure(s)

I, the property owner and applicant, certify that I have read the Historic Districts Commission Design Guidelines and its Rules and Regulations and will conform to all applicable provisions and conditions. (If owner is not available to sign they may send letter or email RockportHistorical@gmail.com stating the above.

Signature of Property Owner: _____

Signature of Applicant: _____

(Required if applicant is not owner)

Description of work:

(State the scope of work including the specific information about extent of work, dimensions, style, and materials. Attach additional sheets if required. Electronic copy of Scope and Material list is requested. This can be also be emailed to RockportHistorical@gmail.com.